POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	_m_		12/2
FORMALITY REVIEW	ET	926	03-26-01
RESPONSE FORMALITY REVIEW	HA	858	6/19/01

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
– (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim		Date									
Final	Original	4/16/04									
1	✔										
2	✔										
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Claims 51–100 (blank), Claims 101–150 (blank)

If more than 150 claims or 10 actions
staple additional sheet here

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